

MARK

STATE OF MAINE

**VOLUNTARY CANCELLATION
OF REGISTRATION OF MARK**

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Pursuant to [10 MRSA §1527.1B](#), the undersigned hereby applies to the Secretary of State of Maine to voluntarily cancel the following mark registration:

A: Charter Number (if known): _____

B: 1. TEXT – list word(s) protected in the original registration, if any (if none, so indicate)

2. FEATURES – describe in detail the design protected in the original registration, if any (if none, so indicate)

C: The mark registration is voluntarily cancelled upon the filing of this request.

DATED _____

*By _____
(signature of registrant or assignee of record)

(type or print name and capacity)

* This document **MUST** be signed by the registrant OR the assignee of record. ([10 MRSA §1527.1B](#))

Please remit your payment made payable to the Maine Secretary of State.

The execution of this application constitutes an oath or affirmation under the penalties of false swearing under [17-A MRSA §453](#).

Submit completed form to:

**Secretary of State
Division of Corporations, UCC and Commissions
101 State House Station
Augusta, ME 04333-0101
Telephone Inquiries: (207) 624-7752**

Email Inquiries: CEC.Corporations@Maine.gov